

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Effective on 12/08/2004.

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 130.00)

Complete if Known

Application Number	10/792,323
Filing Date	March 3, 2004
First Named Inventor	Lawrence C. Lei
Examiner Name	Sang Yeop Paik
Art Unit	3742
Attorney Docket No.	APPM/005191.C1/ISM/CORE/MCVD/PJS

### METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify)

Deposit Account Deposit Account Number: 50-1074/APPM/005191.C1 Deposit Account Name: Applied Materials, Inc.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)

Credit any overpayments

Under 37 CFR 1.16 and 1.17

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

-20 or HP=      x      =

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

-3 or HP=      x      =

HP = highest number of independent claims paid for, if greater than 3.

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)

- 100 =      / 50 =      (round up to a whole number) x

=

Fees Paid (\$)

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : TERMINAL DISCLAIMER

\$130.00

### SUBMITTED BY

Signature	<i>Robert W. Mulcahy</i>	Registration No. (Attorney/Agent)	25,436	Telephone	713-623-4844
Name (Print/Type)	Robert W. Mulcahy			Date	9/20/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.